REST AVAILARIE CODY

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number 10/500003			
		CLAIMS	AS FILED - (Column		(Column 2)		_	SMALL EN	ITY OR		OTHER THAN SMALL ENTITY	
U.S. NATIONAL STAGE FEES							}	RATE	FEE	1	RATE	FEE
BÁSIC FEE			SMALL ENT. = \$ 150		LÀR	GE ENT. = \$ 300		BASIC FEE	150	OR	BASIC FEE	
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50/\$100			ther situations = \$ 100 / \$ 200		EXAM. FEE	100	1	EXAM, FEE	-
SEARCH FEE .			U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		Allo	ther situations = \$ 250 / \$ 500		SEARCH FEE	50		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 ≐		X \$ 125 =		1	X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			/3 mir	nus 20 =	*			X \$ 25 =		OR	X \$ 50 =	<u> </u>
INDEPENDENT CLAIMS			of m	inus 3 =	*	/		X \$ 100 =	100	OR	X \$ 200 =	
MULTIPLE DEPENDENT CLAIM PRE			ESENT					+ \$ 180 =	100	OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0"						olumn 2		TOTAL	400	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	* .	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
•					•		•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING · AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ſ	X \$ 25 =		OR	X \$ 50 =	
AME	Independent	*	Minus	***		=	Ī	X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 02/2005)